10020183690

FEC FORM 2
STATEMENT OF CANDIDACY

	STATEMENT OF CANDIDACY		SECRETARY OF THE SENATE 10 APR -8 PH 1: 35 if address changed 2. Identification Number SODE00068	
(a) Name of Candidate (in full)			10 ADD THE SENA	
Michael N. Castle			MFK -8 PM	
(b) Address (number and street)	Check if address changed	2. Identification Number 1:35	
2001 Kentmere Place (c) City, State and ZIP Code			12 to This	
Wilmington	DE	19806-2115	3. Is This New Statement (N) OR (A)	
I. Party Affiliation	5. Office Sought		strict of Candidate	
REPUBLICAN PARTY	Senate	DE 00		
D 7. I hereby designate the following name		RINCIPAL CAMPAIGN Principal Campaign Committee		
NOTE:This designation should be	oe filed with the appropriat	e office listed in the instruction	ons.	
(a) Name of Committee (in full)				
Castle Campaign Fund				
(b) Address (number and street))			
PO Box 133				
(c) City, State and ZIP Code				
Wilmington	DE	19899-0133		
D		THER AUTHORIZED C Joint Fundraising Representa	-	
	(including .	Joint Fundraising Representa	-	
. I hereby authorize the following name	(Including of the committee, which is NOT	Joint Fundraising Representa my principal campaign committe	itives)	
. I hereby authorize the following name candidacy.	(Including of the committee, which is NOT	Joint Fundraising Representa my principal campaign committe	itives)	
. I hereby authorize the following name candidacy. NOTE:This designation should be	(Including of the committee, which is NOT	Joint Fundraising Representa my principal campaign committe	itives)	
. I hereby authorize the following name candidacy. NOTE:This designation should to the candidacy of Committee (in full)	(Including ded committee, which is NOT to be filed with the principal committee)	Joint Fundraising Representa my principal campaign committe	itives)	
. I hereby authorize the following name candidacy. NOTE:This designation should to the candidacy of Committee (in full) Castle Victory Committee	(Including ded committee, which is NOT to be filed with the principal committee)	Joint Fundraising Representa my principal campaign committe	itives)	
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. I hereby authorize the following name candidacy. NOTE:This designation should to the candidacy of the candidacy. (a) Name of Committee (in full) Castle Victory Committee (b) Address (number and street) PO Box 365	(Including ded committee, which is NOT to be filed with the principal committee)	Joint Fundraising Representa my principal campaign committe	itives)	
. I hereby authorize the following name candidacy. NOTE:This designation should to the candidacy. (a) Name of Committee (in full) Castle Victory Committee (b) Address (number and street) PO Box 365 (c) City, State and ZIP Code Mclean	(Including and committee, which is NOT to filed with the principal country)	Joint Fundraising Represental my principal campaign committee ampaign committee.	itives)	
. I hereby authorize the following name candidacy. NOTE:This designation should be a cardidacy. (a) Name of Committee (in full) Castle Victory Committee (b) Address (number and street) PO Box 365 (c) City, State and ZIP Code Mclean I certify that I have each	(Including and committee, which is NOT to filed with the principal country)	Joint Fundraising Represental my principal campaign committee ampaign committee.	e, to receive and expend funds on behalf of my	
B. I hereby authorize the following name candidacy. NOTE:This designation should to the castle Victory Committee (in full) Castle Victory Committee (b) Address (number and street) PO Box 365 (c) City, State and ZIP Code Mclean	(Including and committee, which is NOT to filed with the principal country)	Joint Fundraising Represental my principal campaign committee ampaign committee.	ge and belief it is true, correct, and complete.	
NOTE: This designation should be candidacy. NOTE: This designation should be castle Victory Committee (b) Address (number and street) PO Box 365 (c) City, State and ZIP Code Mclean I certify that I have essignature of Candidate Michael N. Castle	VA examined this Statement a	Joint Fundraising Represental my principal campaign committee ampaign committee. 22101-0365 Indicate the best of my knowled	ge and belief it is true, correct, and complete. Date 03/27/2010	
NOTE: This designation should be candidacy. NOTE: This designation should be castle Victory Committee (b) Address (number and street) PO Box 365 (c) City, State and ZIP Code Mclean I certify that I have essignature of Candidate Michael N. Castle	VA examined this Statement a	Joint Fundraising Represental my principal campaign committee ampaign committee. 22101-0365 Indicate the best of my knowled	ge and belief it is true, correct, and complete.	

OPENED INSPECTION



JYENEU

From: Origin ID: ZWIA (302) 656-7500 Carl Hostetter Castle Campaign Fund PO Box 133

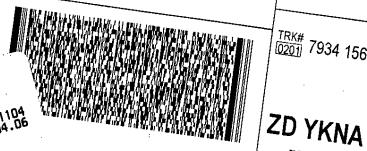
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DANA K. MCCALLUM SUPERINTENDENT

HART SENATE OFFICE BUILDING SUITE 232 WASHINGTON, DC 20510–7116 PHONE: (202) 224–0322

United States Senate

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